Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Democratic Executive Committee of Florida 214 South Bronough Street ADDRESS (number and street) (Check if address is changed) Tallahassee FL 32301 CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS amorgan@fladems.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.floridadems.org (Check if address is changed) DATE 2015 C00005561 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Judy Mount Type or Print Name of Treasurer Judy Mount [Electronically Filed] 09 15 2015 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC F C	orm 1 (Revised 02/2009)	Page 2
TYPE OF (COMMITTEE e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	plete the candidate
Name of Candidate		
Candidate Party Affilia	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		(Domogratic
(d) X	This committee is a STA (National, State or subordinate) committee of the DEM	(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate scommittee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FEO. 7. (2.)	222/2000)	5 2
FEC Form 1 (Revised C		Page 3
	ecutive Committee of Florida	
		and and makin DAC Consequen
-	Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
DSP Joint Victory Fund	d	
	434 Fayetteville Street	
Mailing Address	Ste 2020	
	Raleigh NC	27601
	CITY STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee X Joint Fundraising Representat	tive Leadership PAC Sponsor
 Custodian of Records: Iden books and records. 	ntify by name, address (phone number optional) and position of the pe	erson in possession of committee
Anne Morg	gan	
	214 South Bronough Street	
Mailing Address		
	, Tallahassee	,32301
Title or Position	CITY STATE	ZIP CODE
CFO	88. Telephone number	50
3. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
Full Name Judy Moun	t	
Mailing Address	214 South Bronough Street	
	Tallahassee	32301
Title or Position	CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number	50 222 3411

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Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE Z	ZIP CODE
Title or Position		
	Telephone number	
safety deposit box Name of Bank, D	Depositories: List all banks or other depositories in which the committee deposits funds, holds sees or maintains funds. Depositories: List all banks or other depositories in which the committee deposits funds, holds sees or maintains funds. Depository, etc. Capital City Bank	accounts, rents
safety deposit box	kes or maintains funds. epository, etc.	accounts, rents
safety deposit box Name of Bank, De	ces or maintains funds. epository, etc. Capital City Bank	accounts, rents
safety deposit box Name of Bank, De	Capital City Bank 217 North Monroe Street Tallahassee FL 32301	zip code
safety deposit box Name of Bank, De	Capital City Bank 217 North Monroe Street Tallahassee CITY STATE Z	
safety deposit box Name of Bank, De Mailing Address	Capital City Bank 217 North Monroe Street Tallahassee CITY STATE Z	
safety deposit box Name of Bank, De Mailing Address	Capital City Bank 217 North Monroe Street Tallahassee CITY STATE Z	
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safety deposit box Name of Bank, De Mailing Address Name of Bank, De	Capital City Bank 217 North Monroe Street Tallahassee CITY STATE Z	

: 97 A = G7 9 @ 5 B9 CI G'H9 LHF9 @ 5 H98 'HC'5 F9 DCFHZ G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: F1N Transaction ID:

Transfers received from the DNC, DCCC, DSCC and candidate committees, not including ASDC/Dollars for Democrats and DNC Victory Fund, were not for joint fundraising. None of the transfer in money received from the DNC or DCCC was used in the payments made for exempt activities. None of the expenses listed on Line 21b were public communications or FEA activities. The payments listed on H4, including all consulting fees, were administrative/committee fundraising expenses and not FEA nor in connection with a federal election. Payroll and all related expenses reported on Schedule H4 were for staff that did not spend more than 25% of their time on FEA or in connection with a federal election.

Form/Schedule: Transaction ID:

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 6 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. 434 Fayetteville Street Mailing Address 27601 Raleigh CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor **Dollars for Democrats** 430 South Capitol Street SE Mailing Address Ste 300 DC 20003 Washington **CITY** STATE 4 ZIP CODE Relationship: Joint Fundraising Representative Leadership PAC Sponsor Connected Organization Affiliated Committee [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

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Page 7 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. ı SunTrust 941 Annapolis Road Mailing Address 20706 Lanham CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Democratic National Committee State Party Victory Fund 430 South Capitol Street SE Mailing Address Washington DC 20003 **CITY** STATE 4 ZIP CODE Relationship: Joint Fundraising Representative Connected Organization Affiliated Committee Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 8 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Committee of the South P.O. BOX 4385 Mailing Address Baton Rouge 70821 **CITY** STATE 4 ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number